

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m G</i>		<i>4/7/00</i>
O.I.P.E. CLASSIFIER		<i>15</i>	<i>4/7/00</i>
FORMALITY REVIEW		<i>71622</i>	<i>6-5-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/5/01
2	✓	✓	3/5/01
3	✓	✓	3/5/01
4	✓	✓	3/5/01
5	✓	✓	3/5/01
6	✓	✓	3/5/01
7	✓	✓	3/5/01
8	✓	✓	3/5/01
9	✓	✓	3/5/01
10	✓	✓	3/5/01
11	✓	✓	3/5/01
12	✓	✓	3/5/01
13	✓	✓	3/5/01
14	✓	✓	3/5/01
15	✓	✓	3/5/01
16	✓	✓	3/5/01
17	✓	✓	3/5/01
18	✓	✓	3/5/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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